

## Agribusiness Swimming Pool Questionnaire

Named Insured - \_\_\_\_\_

Policy Number - \_\_\_\_\_

**1. Size and depths:**

Length: \_\_\_\_\_ ft.      Width: \_\_\_\_\_ ft.  
Max. Depth: \_\_\_\_\_ ft.      Min. Depth: \_\_\_\_\_ ft.

Depths Marked? Yes  No       Clearly visible from all sides? Yes  No

**2. Construction of Pool:**

Gunite/Concrete       Vinyl       Other: \_\_\_\_\_

**3. Type of Pool:**

In-ground       Above Ground      Age: \_\_\_\_\_

**4. Fencing:**

Height: \_\_\_\_\_ ft.      Construction Material: \_\_\_\_\_

Gates/Doors Self-Closing and Self-Latching?      Yes       No

Gates/Doors locked when closed/at night?      Yes       No

**5. Pool Deck/Patio:**

Slip-resistant? Yes  No       Self-Draining? Yes  No

**6. Diving Board(s) and Other Exposures:**

Number: \_\_\_\_\_      Height over water: \_\_\_\_\_ ft.

Depth of Water under the Diving Board: \_\_\_\_\_ ft.

Water Slide?      Yes  No       Height above Pool Deck: \_\_\_\_\_ ft.

Spa/Jacuzzi?      Yes  No

Included in the Pool:      Yes  No  or Separate:      Yes  No

**7. Safety:**

Life rings/Shepard's hook available/accessible?      Yes  No

Ground fault interrupter on pool and area lighting?      Yes  No

Are there Ladders to allow safe access out of pool?      Yes  No

Any unsupervised activities?      Yes  No

If Yes, explain: \_\_\_\_\_

Does the insured have a gate and/or water alarm?      Yes  No

Are the Chemicals checked on a regular basis?      Yes  No

Where are the pool chemicals stored? \_\_\_\_\_

Named Insured's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\* Please attach a Photograph(s) of the Pool and Surrounding Area \*\*\***